

No

(CFA-4)

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

IS THIS AN AMENDMENT?

Summary Sheet

FILE NUMBER

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For
assistance in completing this form, see instructions on the reverse side.

Yes

PH 3: 35

HAMILTON COUNTY COURTS:

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COMMITTEE INFORMATION		
1. Full/plame of Confinittee (as on Statement of Organization) Check if this is a new name Organization	CUCYTONS FOR STAT	SPECIAL-INGTE
Acronym or Abbreviated Name (if any)	Committee Telephone Nu	mber
network property and to promote that the tree no muores and	se see) dhooseathaile	a the or excess ourbuilding to est a
4. Mailing Address (address where all campaign finance correspondence is received) Check	if this is a new address	pen a (f) tent dalam mas sa Gala mate anom-Lawren inte Gala mate anom-Lawren inter-
5. City State, ZIP Code IV IN 46062	Party Affiliation (if applicable COUNTY)	nle)
CANDIDATE INFORMATION (For Candidate's Comn		
7. Full Mame of Candidate (include any nictiname) 8. F	Party Affiliation or If Indepe	endent Candidate
County Touncel At Large	County of Residence	tun
TYPE OF REPORT	SECURITION OF STREET	ITION CANDIDATES ONLY
1. Check one: Pre-Primary Pre-Election Annual Nomination Other		Convention
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Utgoing Treasurer (within 10 days amend Statement of Organia	zation) L Post-	-Convention
2. Reporting Period: 10 18 2008 Through: 2 31 2008	COLUMN A This Period	COLUMN B Year to Date
Cash on hand and investments at the beginning of this reporting period.	171.41	
Cash on hand and investments January 1, current year.		4)42.37
CONTRIBUTIONS AND RECEIPTS		
Note: these amounts include in-kind contributions and loans, as well as cash contributions.)	2300.00	3875.43
5a. Itemized (use Schedule A) 5b. Unitemized	0,00.00	7015.45
5c. Add lines 15a and 15b in both columns SUBTOTAL	1300.00	207543
6. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL	247141	4717 00
EXPENDITURES		
Note: These amounts include in-kind expenditures and loan repayments.)		
7a. Itemized (use Schedule B) (Public Question: use Schedule C)	2000.00	4246.39
7b. Unitemized	0	0
7c. Add lines 17a and 17b in both columns SUBTOTAL	2000.00	4246.39
Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTA	47141	471.41
B. Debts OWED BY the committee (use Schedule D)	1700.00	
D. Debts OWED TO the committee (use Schedule E)	0	

Signature on File

Title Treasurer Date 1/20/09

RTIFICATION

Date 1/20/09

d for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowlingly person who fails to file a complete or accurate report as required by the Indiana 14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

FOR OFFICE USE ONLY



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

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Page	1	of	1	UBOT!

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
John Culp	Contributions: Direct In-Kind (describe)	250.00	400.00	11/4/08
970 Logan St. Noblesville IN 46060	Other Receipts: Interest Loan Misc. (specify)	230.00	700.00	Brad Beaver
2.	Contributions: Direct In-Kind (describe)	the total and the second	holni hodisquos	Denoar year
allings etc.) For miscellaneous us.a.,	Other Receipts: Interest Loan Misc. (specify)	to they are mount	the provided	BLOOM A AMOUNT
Contributor's Occupation (if required)	COLUMN TO THE PURPLE	112 4.11 54111-1-1-1	bodse on	money also total
and the property of the probability of the state of the s	Contributions: Direct In-Kind (describe)	DATE. CHAR	TIVE YEAR-IT	MV B CUMUL traile idal yes
se the entry in Column A. For checks and money enders indicate percent, NOT the sale it you lighten or	Other Receipts: Interest Loan Misc. (specify)	exat, the entry li by and year the chack of money	each calendar ter the month a deposited the	TECE VED: En
4.	Contributions: Direct In-Kind (describe)	nost anw 150m w	10 1-9-1-24 5)	ballarin on maly seried :Y8 G3V
to eggs one yind a warfit. A subartit	Other Receipts: Interest Loan Misc. (specify)	I E A: Enter the	DE OF SCHEDI	DIAL THIS PA
Contributor's Occupation (I required)	UST PAGE ONLY: Enter	JEHI NO A S.A.	S ON SCHED	DAY JUAN
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
Contributor's Occupation (if required)				
	HIS PAGE OF SCHEDULE A	\$ 250.W		
TOTAL OF ALL PAGES OF SCHEDULE A		\$ 250.00		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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	Other Receipts: Interest Loan Misc. (specify)	na somen encal. Inh	os a primeira na	ORTANT: WIN
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	Other Receipts: Interest Loan Misc. (specify)	iso entechni li qu		381111101
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY

LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print
legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the
reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All
cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this
schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds,
rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year,
MUST be itemized on this schedule (over \$200 if regular party committee).

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5.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
Indiana State Teachers Assuc. loleblo & 75 st Indianopolis IN 410250	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)	50.00	50.00	11/4/08 Brad Beaver
2. DOCAT meet aboreles à mid work 1670 ex- processe à extreme consider et la complete de la comp	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)	contact name in the second in	entering a continuition of or	nemil : I WATE
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
Hamilton County Republican Party 7246 Fishers Crossing Dr Fishers IN 46038	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)	2000.00	2000.00	Brood Brader
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

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RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
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TOTAL OF ALL PAG	ES OF SCHEDULE B ON THE I (Enter total on ITEM 17a of the	LAST PAGE ONLY	2000.W		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

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Enter Text of Public Question Type of Question: Statewide	stand was been another purchase continue of parties or neales of offi- courses.	ION INFORMATION		prices and and and and and and and and	tehgorgg a entr usophro.ntx nconggs art skespog arc of
Position: Supported Oppos RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)		TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

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CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE E) DEBTS OWED TO THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED TO the committee during the reporting period. Include all amounts the committee has loaned to others.

	FILE NUMBER
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(street, number, city, state, ZIP code) (street, number, city, state, ZIP code) NATURE OF DEBT NUMBER OF DEBT YEAR-TO-DATE YEAR	Signers Signers
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